

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000000553

FILED  
Jan 25, 2006  
Secretary of State

Entity Name: FOURTH DIMENSION ENGINEERING, INC. .

## Current Principal Place of Business:

302 WEST NORTH BLVD.  
SUITE 302 1/2  
DAVENPORT, FL 33837 US

## New Principal Place of Business:

## Current Mailing Address:

C/O ACCTG & BUS CNSLTS  
1535 SE 17TH STREET #206  
FORT LAUDERDALE, FL 33316

## New Mailing Address:

FEI Number: 65-0630290

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KNOX, GARY  
302 N BLVD W  
DAVENPORT, FL 33837 US

## Name and Address of New Registered Agent:

KNOX, GARY W  
302 N BLVD W  
DAVENPORT, FL 33837 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: GARY W KNOX

01/25/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: KNOX, GARY  
Address: 302 NORTH BLVD WEST  
City-St-Zip: DAVENPORT, FL 33837

Title: VP ( ) Delete  
Name: KNOX, JANINE  
Address: 302 NORTH BLVD WEST  
City-St-Zip: DAVENPORT, FL 33837

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: KNOX, GARY W  
Address: 302 NORTH BLVD WEST  
City-St-Zip: DAVENPORT, FL 33837

Title: VP (X) Change ( ) Addition  
Name: KNOX, JANINE M  
Address: 302 NORTH BLVD WEST  
City-St-Zip: DAVENPORT, FL 33837

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GARY W KNOX

P

01/25/2006

Electronic Signature of Signing Officer or Director

Date